

## HB 1087 -- Adult Health Care Consent Act

Sponsor: White

This bill establishes the Adult Health Care Consent Act which specifies an order of priority of persons who can make health care decisions for an individual who has been certified as physically and cognitively unable to consent to his or her own health care. The order of priority is:

- (1) A court-appointed guardian;
- (2) An attorney-in-fact appointed in a durable power of attorney;
- (3) An individual appointed by law;
- (4) A spouse, unless the spouse and the patient are separated or have a divorce pending;
- (5) A parent or adult child;
- (6) An adult sibling, grandparent, or adult grandchild;
- (7) Any other relative by blood or marriage who has a close personal relationship with the patient;
- (8) Any nonrelative who reasonably is believed by the health care professional to have a close personal relationship with the patient; and
- (9) A person given authority to make health care decisions for the patient by another statutory provision.

These provisions cannot prohibit any person interested in the welfare of a patient from petitioning the probate court for an order determining the care to be provided or the appointment of a guardian for the patient.

Any person in the order of priority who is not reasonably available, is not willing to make a health care decision, or is unable to consent as determined by the responsible health care provider will not be given a priority. If persons of equal priority disagree on whether certain health care should be given, an authorized person, an involved health care provider, or any other interested person can petition the probate court for an order to determine what care is to be provided to the patient or for the appointment of a temporary or permanent guardian. If a health care professional has reasonable cause to make a report of an alleged perpetrator of abuse or neglect of a patient, the

alleged perpetrator will not be given priority or authority to make health care decisions for the patient.

If a patient communicates to his or her physician prior to becoming unable to consent to care that a certain person should not be involved in any health care decisions, the physician cannot give priority or authority to that individual. Any person authorized to make a health care decision must base that decision on any known wishes of the patient or, if the patient's wishes cannot be determined, on the patient's best interest. Health care decisions on behalf of a patient who is unable to consent may be made by a person on the priority list if no person having higher priority is available immediately and, in the reasonable judgment of the attending health care professional, the delay in attempting to locate a person having higher priority presents a substantial risk or serious threat to the health of the patient. If no one on the priority list is available under these circumstances, the attending health care professional is authorized to make health care decisions for the patient. Treatment for the relief of suffering can be provided without consent at any time that an authorized person is unavailable, but a physician cannot make health care decisions that contradict a patient's religious beliefs or expressed instructions stated by the patient when he or she was able to consent.

A person acting in good faith regarding a health care decision cannot be subject to criminal or civil liability for the outcome of the decision, and any health care provider acting in good faith cannot be subject to criminal or civil liability or disciplinary action as long as the care was not provided in a negligent manner. Nothing in the act will limit an individual from seeking guardianship, prohibit a state agency or health care provider from conducting tests or providing treatment which is mandated or allowed by other provisions of law, or affect the ability of the Department of Mental Health from executing its specified authority.